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Substitute for form 1449/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(Use as many sheets as necessary)</i>				<b>Complete if Known</b>	
				Application Number	10/574,311-Conf. #2276
				Filing Date	March 31, 2006
				First Named Inventor	Katsushi Ohizumi
				Art Unit	N/A
				Examiner Name	Not Yet Assigned
				Attorney Docket Number	65213(71117)
Sheet	2	of	2		

[illegible]

Examiner Signature	/Marc Dazenski/	Date Considered	04/10/2009
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /M.D./